



PATENT

#3

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

APPLICANT(S): Hon Wah Chin

APPLICATION NO.: 09/650,254

FILING DATE: August 29, 2000

TITLE: RELATIVE ADDRESSING FOR NETWORK ELEMENTS

EXAMINER: Unknown

GROUP ART UNIT: 2152


ATTY. DKT. NO.: 5067

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**CERTIFICATE OF MAILING**

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Dated: 1/10/01

By:   
Edward A. Van Gieson, Reg. No.: 44,386

DIRECTOR FOR PATENTS  
WASHINGTON, DC. 20231

**STATEMENT REGARDING SUPPLEMENTAL DECLARATION**  
**Under 37 CFR § 1.67**

SIR:


Attached is a supplemental Declaration for the above-described case, Application No. 09/650,254. During the preparation of the case, a signed Declaration was filed concurrently with the application on August 29, 2000. Upon receiving the Filing Receipt, applicant has discovered that the residence address and citizenship were inadvertently omitted in the original Declaration filed on August 29, 2000. Consequently, applicant respectfully requests that a supplemental Declaration, which includes the inventor's residence address and citizenship, be entered for this case. Applicant respectfully requests that the attached Declaration be entered as a supplemental

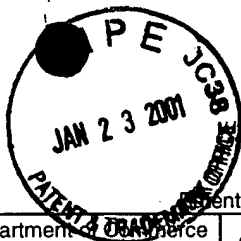
**PATENT**

Declaration under 37 CFR § 1.67 to address any inadvertent deficiencies in the Declaration filed on August 29, 2000.

Respectfully submitted,  
HON WAH CHIN

Dated: 1/10/01

By:   
Edward A. Van Gieson, Reg. No.: 44,386  
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GAU 2152



PTO/SB/21 (modified)

Approved for use through xx/xx/xx, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0001/PTO Rev. 10/95  <b>TRANSMITTAL FORM</b>  (to be used for all correspondence during pendency of filed application)	U.S. Department of Commerce Patent and Trademark Office	Application Number	09/650,254	
		Filing Date	August 29, 2000	
		First Named Inventor	Hon Wah Chin	
		Group Art Unit Number	2152	
		Examiner Name	Unknown	
Total Number of Pages in This Submission		7	Attorney Docket Number	5067

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [ ] Sheet(s) of Figure(s) [ ]
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Declaration Submitted After Initial Filing	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Information Disclosure Statement & PTO-1449 <input type="checkbox"/> Copies of IDS Cited References	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Request for Corrected Filing Receipt	<input checked="" type="checkbox"/> Statement Regarding Supplemental Declaration
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/> _____
<input type="checkbox"/> Amendment/Response: [ ] Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/> _____
<input type="checkbox"/> Status Request	<input type="checkbox"/> _____
<input type="checkbox"/> Revocation and Power of Attorney	<input type="checkbox"/> _____
REMARKS:	

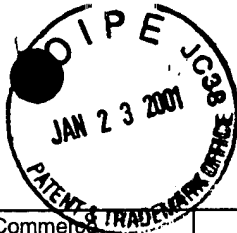
SIGNATURE OF ATTORNEY OR AGENT		
Signature:		
Attorney/Reg. No.:	Edward A. Van Gieson/44,386	Dated: 1/10/01

CERTIFICATE OF MAILING		
I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.		
Signature:		
Typed or Printed Name:	Edward A. Van Gieson	Dated: 1/10/01

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PTO/SB/17 (10-00)(modified)  
Approved for use through 09/29/01, OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0002/PTO(modified)  
Rev. 10/2000

U.S. Department of Commerce  
Patent and Trademark Office

## FEE TRANSMITTAL

### TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = (\$0)

### Complete If Known

Application Number	09/650,254
Filing Date	August 29, 2000
First Named Inventor	Hon Wah Chin
Group Art Unit	2152
Examiner Name	Unknown
Attorney Docket Number	5067

### METHOD OF PAYMENT

#### 1. The Commissioner is hereby authorized to:

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.<sup>1</sup>
- ☒ Applicant claims small entity status See 37 CFR 1.27

Deposit Account Number: 19-2555  
Deposit Account Name: FENWICK & WEST LLP

A Duplicate Copy of this authorization is attached

#### 2. ☐ Payment Enclosed:

☐ Check ☐ Credit Card ☐ Other

### FEE CALCULATION (fees effective 10/01/2000)

#### 1. FILING FEE

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
101/\$710	201/\$355	Utility Filing	<input type="checkbox"/>
106/\$320	206/\$160	Design Filing	<input type="checkbox"/>
108/\$710	208/\$355	Reissue	<input type="checkbox"/>
114/\$150	214/\$75	Provisional Filing	<input type="checkbox"/>
SUBTOTAL (1)			(\$0)

#### 2. CLAIMS

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
103/\$18	203/\$9	Claims in excess of 20
102/\$80	202/\$40	Independent claims in excess of 3
104/\$270	204/\$135	Multiple dependent claim
109/\$80	209/\$40	Reissue independent claims over original patent
110/\$18	210/\$9	Reissue claims in excess of 20 and over original patent

#### 3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
105/\$130	205/\$65	Surcharge - late filing fee or oath	<input type="checkbox"/>
127/\$50	227/\$25	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
147/\$2,520	147/\$2,520	For filing a request for reexamination	<input type="checkbox"/>
115/\$110	215/\$55	Extension for response within first month <sup>1</sup>	<input type="checkbox"/>
116/\$390	216/\$195	Extension for response within second month <sup>1</sup>	<input type="checkbox"/>
117/\$890	217/\$445	Extension for response within third month <sup>1</sup>	<input type="checkbox"/>
118/\$1,390	218/\$695	Extension for response within fourth month <sup>1</sup>	<input type="checkbox"/>
128/\$1,890	228/\$945	Extension for response within fifth month <sup>1</sup>	<input type="checkbox"/>
119/\$310	219/\$155	Notice of Appeal	<input type="checkbox"/>
141/\$1,240	241/\$620	Petition to revive unintentionally abandoned Application	<input type="checkbox"/>
142/\$1,240	242/\$620	Utility Issue Fee (Or Reissue)	<input type="checkbox"/>
143/\$440	243/\$220	Design Issue Fee	<input type="checkbox"/>
122/\$130	122/\$130	Petitions to the Commissioner	<input type="checkbox"/>
126/\$180	126/\$180	Submission of Information Disclosure Statement	<input type="checkbox"/>
179/\$710	279/\$355	Request for Continued Examination (RCE)	<input type="checkbox"/>
581/\$40	581/\$40	Recording each patent assignment per property (times number of properties)	<input type="checkbox"/>
146/\$710	246/\$355	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="checkbox"/>
149/\$710	249/\$355	For each additional invention to be examined (37 CFR 1.129(b))	<input type="checkbox"/>
Other fee (specify):			<input type="checkbox"/>
Other fee (specify):			<input type="checkbox"/>
SUBTOTAL (3)			(\$0)

(Col. 1)	(Col. 2)	(Col. 3)			
For	No. of Existing Claims	Highest No. Previously Paid For	Extra**	Fee	Fee Due
TOTAL	minus*	20 or 0	=	x	=
INDEP	minus*	3 or 0	=	x	=
[ ] First presentation of multiple dependent claim					

\* Subtract the greater number of Col. 2

\*\* If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) (\$0)

### SUBMITTED BY

Typed or Printed Name: Edward A. Van Gieson  
Signature:

### Complete (if applicable)

Reg. Number: 44,386  
Date: 1/10/01

<sup>1</sup> Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby